Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CLAIMS AS			(Column		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS							ſ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			minus 20=		* _			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			(minus 3 =		* 3			X42=	26	OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT		· · · · · · · · · · · · · · · · · · ·			+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter					"0" in c	olumn 2		TOTAL	57)'	OR	TOTAL	
	CI		MENDED - PART II (Column 2) (Column			(Column 2)		SMALL ENTITY			OTHER SMALL	
		(Column 1) CLAIMS	1	(Colur HIGH		(Column 3)		OIIIAEE .		OR •	V/\	
ENTA		REMAINING NUM AFTER PREVI		BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT A	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* Minus NTATION OF MULTIPLE DE		***		= [-		X42=		OR	X84=	
	PIRST PRESE	1819.21		9	<u></u>	┙┌	+140≈		OR	+280=		
- -	-15- 10,17,18,19,21, 2,9					15		TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)						:
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	<u> </u>		=		X42≃		OR	X84=	
-	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total	*	Minus	**	•	=]	X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=]	X42=			X84=	1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT				T CLAIM			/		OR	<u> </u>	
	# If the option is column 1 is lose than the option is column 2 units *0" is column 2									OR	+280≈	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
1		nher Previously P					or fo	and in the an	nronriate ho	v in co	dumn 1	